

New Hampshire Child Care Advisory Council
Interest Form

Name _____ Date _____

Address _____

Phone 1 _____ Phone 2 _____

Email _____ Fax _____

Reasons for your interest in working with the Advisory Council on child care issues:

Are you interested in working on special projects? ☐ Yes ☐ No

Are you interested in working on a Standing Committee of the Council? ☐ Yes ☐ No

Please select the Committee that interests you the most:

☐ Legislative ☐ Policy Planning ☐ Public Engagement

Employer and position/ title (if applicable):

Are you affiliated with any professional organization or agency? If so, please
identify which ones:

Volunteer Experience:

Past and /or present experience as a board member:

Are you available to attend monthly subcommittee meetings at 8:30 am on the third Friday of each month? ☐ Yes ☐ No

Attendance is not required for participation. Distance committee work will also be conducted through email, phone, and other meetings as necessary.

Please mail or fax form to the attention of Julie McConnell, Chair, CCAC Nominating Committee as follows:

**Julie McConnell, Director, CC Loan Program
New Hampshire Community Loan Fund
7 Wall Street - Concord, NH 03301
Fax #: 225-7425 Tel #: 224-6669**

7/07 TMc/soc